

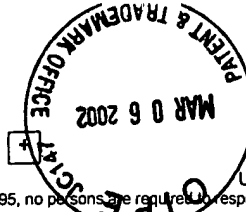
FEE TRANSMITTAL for FY 2002 <small>Patent fees are subject to annual revision.</small>		Complete if Known																																																																																																																																																																																																																															
<input type="checkbox"/> Application claims small entity status. See 37 CFR 1.27		Application Number	09/318,159																																																																																																																																																																																																																														
TOTAL AMOUNT OF PAYMENT (\$) 430.00		Filing Date	May 25, 1999																																																																																																																																																																																																																														
		First Named Inventor	Howard E. Rhodes																																																																																																																																																																																																																														
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METHOD OF PAYMENT (check all that apply) <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 04-1073 Deposit Account Name: Dickstein Shapiro Morin & Oshinsky LLP The Commissioner is hereby authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		FEE CALCULATION (continued)																																																																																																																																																																																																																															
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SUBMITTED BY Name (Print/Type) Thomas J. D'Amico Signature		Complete (if applicable) Registration No. (Attorney/Agent) 28,371 Telephone (202) 828-2232 Date March 6, 2002																																																																																																																																																																																																																															

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PTO/SB/21 (08-00)



TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/318,159	
	Filing Date	May 25, 1999	
	First Named Inventor	Howard E. Rhodes	
	Group Art Unit	2811	
	Examiner Name	G. Munson	
Total Number of Pages in This Submission		Attorney Docket Number	M4065.0335/P335-A

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input checked="" type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief), Request for extension of time for an Appeal Brief <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below)
REMARKS		

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual Name	DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP Thomas J. D'Amico, Reg. No.: #28,371
Signature	
Date	March 6, 2002